International
Braz J Urol

EDITOR'S COMMENT

The March - April 2004 issue of the International Braz J Urol presents interesting contributions from many countries and the Editor's Comment will highlight some important papers.

Doctor Ng and co-workers, from Prince of Wales Hospital, Hong Kong, China, published on page 102 an original and inventive work on the use of non-contrast helical computerized tomography (NCHCT) in the measurement of differential renal parenchymal volume as a surrogate for differential creatinine clearance for unilateral chronically obstructed kidney. The authors found that the differential renal parenchymal volume measured by NCHCT provided a reasonable prediction of differential creatinine clearance in chronically obstructed kidneys. Doctors William Bush from Washington University and Arthur Rosenfield from Yale University, USA, well-known world experts in uroradiology, provided editorial comments on this paper.

Doctor Bogaert and colleagues, from University of Leuven, Belgium, and Linz, Austria, presented on page 128 a long-term observation of children with a non-neurogenic neurogenic bladder dysfunction (Hinman's syndrome), and investigated the safety and efficacy of long-term use of terazosine in association with prophylactic antibiotics, timed voiding and a bowel regimen. The authors concluded that the alpha-blocker medication, terazosine can be administered safely to children with this syndrome. The results have shown that dysfunctional voiding, postvoiding residual and upper tract involvement can disappear over time when long term terazosine is given in combination with timed voiding, prophylactic antibiotic therapy and treatment of the associated constipation. The authors' observations also suggest a permanent effect after discontinuing the medication.

Doctor Kondabolu and associates, from State University of New York, Stony Brook, USA, presented on page 96 a review on the role of endoluminal ultrasonography in urology. Although a relatively new method, the clinical application of this technique holds great promise in the field of endourology. The technology, advantages, limitations, validation studies, clinical applications, and future of endoluminal ultrasonography are explored through this comprehensive review of current urologic literature.

Doctor Miotto Jr and colleagues, from Federal University of São Paulo, Brazil, studied on page 109 the incidence of prostate cancer when all variables for PSA assessment are considered altogether, specifically total PSA, free fraction, PSA velocity and PSA stratified by age, in a population of men with abnormal values of PSA variables and normal digital rectal examination. The authors concluded that when patients with normal digital rectal examination are selected for pros-

tate biopsy due to total PSA levels above 4 or free to total PSA ratio lower than 15% or PSA velocity higher than 25% per year or high PSA for the age range, the incidence of prostate cancer is quite higher than that observed in a population selected exclusively with basis on total PSA value.

Doctor Fortes and co-workers, from Federal University of São Paulo, Brazil, assessed the effect of shock wave reapplication over urinary N-acetyl-beta-glucosaminidase in the canine kidney (page 148). The authors found that shock wave reapplication with a 24-hour interval did not cause any increase in urinary N-acetyl-beta-glucosaminidase.

Doctor Nardi and colleagues, from State University of Campinas, São Paulo, Brazil, assessed the effects of high-energy shock waves (HESW) on organs adjacent to the kidney, in the growing rat (page 142). The results demonstrated that HESW applied to rat did not inhibit the animals' growth and caused transitory histological lesion in spleen and in liver.

Dr. Francisco J.B. Sampaio
Editor-in-Chief